## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

**Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or <u>Fax</u>

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| 5200 BAYWAY DRIVE<br>P.O. BOX 2149<br>BAYTOWN, TEXAS 77522-2149                    |                                                                                                                                                                                     |                                                                                                                |                                                                                                                      | I hereby certify tha<br>States Postal Service<br>addressed to the M                                                                                                                                                                                                                                                                               | Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. |                               |                                                           |  |
|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------|--|
|                                                                                    |                                                                                                                                                                                     |                                                                                                                |                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                         |                               | (Depositor's name)                                        |  |
|                                                                                    |                                                                                                                                                                                     |                                                                                                                |                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                         |                               | (Signature)                                               |  |
|                                                                                    |                                                                                                                                                                                     |                                                                                                                |                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                         |                               | (Date)                                                    |  |
| APPLICATION NO.                                                                    | FILING DATE                                                                                                                                                                         | FIRS                                                                                                           | T NAMED I                                                                                                            | NVENTOR                                                                                                                                                                                                                                                                                                                                           | ATTORNEY DOCKET NO.                                                                                                                                                                                                                                                                                                                                     |                               | CONFIRMATION NO.                                          |  |
| 10/535,531                                                                         | 06/02/2006                                                                                                                                                                          | Richar                                                                                                         | d Henry S                                                                                                            | Schlosberg                                                                                                                                                                                                                                                                                                                                        | 2002M179                                                                                                                                                                                                                                                                                                                                                |                               | 1619                                                      |  |
| TITLE OF INVENTION:                                                                | HYDROGENATION                                                                                                                                                                       | OF BENZENE PO                                                                                                  | LYCARB                                                                                                               | OXYLIC ACIDS OR DERI                                                                                                                                                                                                                                                                                                                              | VATIVES THERE                                                                                                                                                                                                                                                                                                                                           | EOF                           |                                                           |  |
| APPLN. TYPE                                                                        | SMALL ENTITY                                                                                                                                                                        | ISSUE F                                                                                                        | EE                                                                                                                   | PUBLICATION FEE                                                                                                                                                                                                                                                                                                                                   | TOTAL FEE(S                                                                                                                                                                                                                                                                                                                                             | ) DUE                         | DATE DUE                                                  |  |
| nonprovisional                                                                     | NO                                                                                                                                                                                  | \$151                                                                                                          | 0                                                                                                                    | \$300                                                                                                                                                                                                                                                                                                                                             | \$1810                                                                                                                                                                                                                                                                                                                                                  | ı                             | 06/16/2009                                                |  |
| EXAMINER                                                                           |                                                                                                                                                                                     | ART UNIT                                                                                                       |                                                                                                                      | CLASS-SUBCLASS                                                                                                                                                                                                                                                                                                                                    | -SUBCLASS                                                                                                                                                                                                                                                                                                                                               |                               |                                                           |  |
| PUTTLITZ, KARL J.                                                                  |                                                                                                                                                                                     | 1621                                                                                                           | •                                                                                                                    | 560-127000                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                         |                               |                                                           |  |
| PTO/SB/47; Rev 03<br>Customer Number<br>3. ASSIGNEE NAME AN<br>PLEASE NOTE: Unless | adence address (or Change B/122) attached. tion (or "Fee Address" In -02 or more recent) attacl is required.  D RESIDENCE DATA an assignee is identified a 37 CFR 3.11. Complet IEE | e of Correspondence adication form hed. Use of a  TO BE PRINTED O dbelow, no assignee d ion of this form is NO | (1) the na or agents (2) the na registerec registerec listed, no N THE PA lata will app T a substit (B) RESID HOUSTO | nting on the patent front page<br>mes of up to 3 registered pat<br>OR, alternatively,<br>me of a single firm (having a<br>lattorney or agent) and the n-<br>lpatent attorneys or agents. I<br>name will be printed.  TENT (print or type) pear on the patent. If an assi-<br>ute for filing an assignment.  ENCE: (CITY and STATE on, TEXAS (USA) | ent attorneys 1 as a member a 2 ames of up to 2 f no name is 3 gnee is identified be                                                                                                                                                                                                                                                                    |                               | cument has been filed for                                 |  |
| 4a. The following fee(s) are  ✓ Issue Fee                                          | e enclosed:                                                                                                                                                                         |                                                                                                                | ayment of F<br>A check i                                                                                             | Fee(s):  n the amount of the fee(s) is                                                                                                                                                                                                                                                                                                            | enclosed.                                                                                                                                                                                                                                                                                                                                               |                               |                                                           |  |
| ▼ Publication Fee (No)                                                             | small entity discount pen                                                                                                                                                           | mitted)                                                                                                        | Payment                                                                                                              | by credit card. Form PTO-20                                                                                                                                                                                                                                                                                                                       | 38 is attached.                                                                                                                                                                                                                                                                                                                                         |                               |                                                           |  |
| ✓ Advance Order - # o                                                              | f Copies1                                                                                                                                                                           |                                                                                                                |                                                                                                                      | ctor is hereby authorized to eccount Number0                                                                                                                                                                                                                                                                                                      | harge the required f<br>5-1712                                                                                                                                                                                                                                                                                                                          | ee(s), or cre                 | edit any overpayment,                                     |  |
| 5. Change in Entity Statu                                                          | s (from status indicated a                                                                                                                                                          | above)                                                                                                         |                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                         |                               |                                                           |  |
| a. Applicant claims S                                                              | SMALL ENTITY status.                                                                                                                                                                | See 37 CFR 1.27.                                                                                               | □ b. A                                                                                                               | pplicant is no longer claimin                                                                                                                                                                                                                                                                                                                     | g SMALL ENTITY                                                                                                                                                                                                                                                                                                                                          | status. Se                    | e 37 CFR 1.27(g)(2).                                      |  |
| The Director of the USPTC above.NOTE: The Issue Foother party in interest as sh    | ee and Publication Fee (if                                                                                                                                                          | required) will not be                                                                                          | accepted fr                                                                                                          | (if any) or to re-apply any prom anyone other than the apnark Office.                                                                                                                                                                                                                                                                             | eviously paid issue<br>plicant; a registered                                                                                                                                                                                                                                                                                                            | fee to the ap<br>lattorney or | oplication identified agent; or the assignee or           |  |
| Authorized Signature /Andrew B. Griffis/                                           |                                                                                                                                                                                     |                                                                                                                |                                                                                                                      | Date                                                                                                                                                                                                                                                                                                                                              | April 20, 2009                                                                                                                                                                                                                                                                                                                                          | 1                             |                                                           |  |
| Typed or printed name Andrew B. Griffis                                            |                                                                                                                                                                                     |                                                                                                                |                                                                                                                      | Registrat                                                                                                                                                                                                                                                                                                                                         | ion No.                                                                                                                                                                                                                                                                                                                                                 | 36,3                          | 336                                                       |  |
| process) an application. Co<br>preparing, and submitting                           | onfidentiality is governed<br>the completed application                                                                                                                             | l by 35 U.S.C. 122 at<br>n form to the USPTC                                                                   | nd 37 CFR<br>D. Time wil                                                                                             | quired to obtain or retain a b<br>1.14. This collection is estin<br>Il vary depending upon the in<br>d be sent to the Chief Infor                                                                                                                                                                                                                 | nated to take 12 mi<br>ndividual case. Any                                                                                                                                                                                                                                                                                                              | nutes to con                  | mplete, including gathering,<br>on the amount of time you |  |

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